PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10601277

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			71				I	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS) minus 20=		*	51		X\$ 9≈		OR	X\$18=	918	
INDEPENDENT CLAIMS			12 m	inus 3 =	*	8	1	X42=		OR	X84=	764	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESEÑT				ł	+140≃			+280=	100	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				Ì			OR		1.00.0	
								TOTAL		OR	TOTAL	がかかみ	
		(Column 1)	MENDED - PART II (Column 2) (Column			(Column 3)		SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42≈		OR	X84=		
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		1	+140=		OR	+280=		
	TOTAL										TOTAL		
ADDIT. FEEOH ADDIT. FEE													
AMENDMENT B		(Column 1) CLAIMS		(Colur	EST	(Column 3)	l r		ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM		1	+140=		OR	+280=		
1							l	TOTAL		OR	TOTAL		
										JUN	ADDIT. FEE	L	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J			OR		 	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+280≈		
**	** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa					er foi	and in the ap	propriate bo	x in co	olumn 1		